



Please type a plus sign (+) inside this box → ☐

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

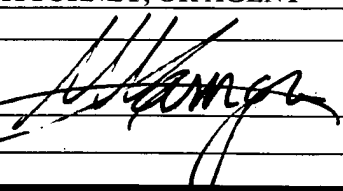
PTO/SB/21

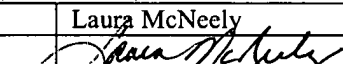
OMB 0651-0031

3735
1Fw

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/524,228
		Filing Date	02/09/2005
		First Named Inventor	JOHNSTONE, Alan, John
		Group Art Unit	3735
		Examiner Name	Natnithithadha, Navin
Total Number of Pages in This Submission	8	Attorney Docket Number	205139 (8830-308)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response to Office Action dated 12/22/08 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) – Replacement <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Declaration & Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Name	Drinker Biddle & Reath LLP
Signature	
Printed Name	Gregory J. Lavorgna – 30469
Date	March 18, 2009

CERTIFICATE OF MAILING UNDER 37 CFR 1.8	
I hereby certify that this paper, along with any documents referred to as being enclosed therewith, is being deposited with the United States Postal Service in an envelope addressed to U.S. Patent Office, Assistant Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:..	
Typed or printed name	Laura McNeely
Signature	
Date: March 18, 2009	



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Patent application of:

JOHNSTONE, Alan, John

Application No.: 10/524,228

Group Art Unit: 3735

Filed: 02/09/2005

Examiner: Natnithithadha, Navin

Title: Method and Apparatus for Determining Ischaemia

Attorney Docket No.: 205139 (8830-308)

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Sir:

This is in response to the Office Action mailed December 22, 2008, in this application. This response is being filed within the three-month period for response set in the Action, therefore no fee is believed due. However, please charge any fee due, and credit any refund, to deposit account no. 50-0573.

Amendments to the Claims begin on page 2.

Remarks begin on page 4.